PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 DICKE BILLIG & CZAIA

PTOL-85 (Rev. 02/11) Approved for use through 08/31/2013.

25281

02/18/2011

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advances orders and notification of maintenance fees will be mailed to the current correspondence address, and indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

| FIFTH STREET TOWERS 100 SOUTH FIFTH STREET, SUITE 2250 MINNEAPOLIS, MN 55402 | | | | I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | |
|---|--|---|--|---|--|---|
| , | | | | | | (Depositor's name) |
| | | | | | | (Signature) |
| | | | | | | (Date) |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTOR | AT | TORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/585,151 10/16/2007 | | Martin Brox | Q601 | 131.101/2003P53957US | 8215 | |
| TITLE OF INVENTION: | VOLTAGE REGULA | TION SYSTEM | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEI | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1510 | \$300 | S0 | \$1810 | 05/18/2011 |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | |
| PHAM, EN | | 2838 | 323-282000 | | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | | | 2. For printing on the patent front page, list Dicke, Billig & | | | |
| ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the control of the contro | | | |
| ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | (2) the name of a single firm (having as a member a registered atorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| 3. ASSIGNEE NAME AN | | | | | | |
| PLEASE NOTE: Unler recordation as set forth | ss an assignee is ident in 37 CFR 3.11. Com | ified below, no assignee | data will appear on the p T a substitute for filing an | atent. If an assignee is | identified below, the do | cument has been filed for |
| (A) NAME OF ASSIG | | | (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | |
| Qimonda AG | | | Munich, German | У | | |
| Please check the appropria | ite assignee category or | categories (will not be p | rinted on the patent) : | Individual 🖾 Corpor | ation or other private gro | up entity Government |
| 4a. The following fee(s) are submitted: ☑ Issue Fee | | | 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) | | | |
| ☑ Publication Fce (No small entity discount permitted) | | | Payment by credit card. Form PTO-2038 is attached. | | | |
| Advance Order - # of Copies | | | The Director is hereby overpayment, to Depo | authorized to charge th sit Account Number_5 | e required fee(s), any def 00471 (enclose an | iciency, or credit any extra copy of this form). |
| 5. Change in Entity State | | | | | | |
| | | | b. Applicant is no lon | | | |
| NOTE: The Issue Fee and interest as shown by the re | cords of the United Sta | tes Patent and Trademark | Office. | no approant, a registere | a autoracy or agont, or ar | assigned of other party in |
| Authorized Signature _ | /Steven E. I | icke/ | | Date May | 11, 2011 | |
| Typed or printed name Steven E. Dicke | | | | Registration No | | |
| This collection of informal an application. Confidentia submitting the completed this form and/or suggestio Box 1450, Alexandria, Vin Alexandria, Virginia 2231: | tion is required by 37 Cality is governed by 35 application form to the ns for reducing this burginia 22313-1450. DC 3-1450. | FR 1.311. The informati U.S.C. 122 and 37 CFR USPTO. Time will var rden, should be sent to the NOT SEND FEES OR | on is required to obtain or a 1.14. This collection is est depending upon the individe Chief Information Office COMPLETED FORMS TO | etain a benefit by the pr imated to take 12 minu idual case. Any comme r, U.S. Patent and Trac THIS ADDRESS. SE | ablic which is to file (and tes to complete, including ents on the amount of tin emark Office, U.S. Depa ND TO: Commissioner f | by the USPTO to process) g gathering, preparing, and te you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450, |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.